Patent

(IUN 0 5 1006 B)

Attorney's Docket No. 1034497-000018

E UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of	) Group Art Unit: 1732
Joseph A. MacDougald et al.	) Examiner: Stefan Staicovici
Application No.: 10/659,640	) Confirmation No.: 5238
Filing Date: September 10, 2003	) )
Title: METHOD FOR MANUFACTURING DENTAL RESTORATIONS	) ) )

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## REQUEST FOR CONTINUED EXAMINATION TRANSMITTAL LETTER

Customer Number 21839

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the □\$395 ⋈ \$790 fee due under 37 C.F.R. § 1.17(e).

1. □ A. Applicant(s) requests that any previously unentered after final amendments not be entered. Continued examination is requested based on the enclosed documents identified in item 2 below.

☑ B. Applicant(s) previously submitted the following documents for which continued examination is requested:

	$\bowtie$	Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on May 5, 2006.						
		Consider the arguments in the Appeal Brief or Reply Brief previously filed on						
		Other:						
The	follov	ving documents are enclosed with this sub	mission:					
	Ame	endment/Reply.						
	Affic	davit(s)/Declaration(s).	06/06/2006 JADDO1	89690076 19659649				
	Info	rmation Disclosure Statement.	91 FC:1891	790.00 OP				
$\boxtimes$	A Petition for Extension of Time.							
	Othe	er:						
	Sma	all entity status is hereby claimed.						

## Request for Continued Examination Transmittal Letter Application No. <u>10/659,640</u> Attorney's Docket No. <u>1034497-000018</u> Page 2

$\bowtie$	No additional claim fee is required.	
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 $\boxtimes$ The fee is calculated below on the basis of the highest number of claims already paid for in this application prior to this submission.

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Examina	ation Fee (1801)					\$	790
	·	No. of Claims		Extra Claims	Rate		
Total Claims		10	Minus 20=	0	x 50 (1202)	\$	0
Independent Claims 1		Minus 3=	0.	x 200 (1201)	\$	0	
If multip	le dependent cla	ms are pres	ented, add \$ 3	1 60		\$	0
Total Fe	e					\$	790
☐ Sma	ll Entity Status cla	aimed - subt	ract 50% of To	tal Application	on Fee	\$	0
TOTAL	FEE DUE					\$	790
3. 🛚	§ 1.17(i) is e The Director §§ 1.16, 1.1	nclosed. is hereby a	authorized to that may be r	charge any	The required fee y appropriate fees this paper, and to This paper is sul	under 37 C.I	
			Respectful	ly submitte	d,		
			BUCHANA	NINGERS	SOLL PC		
Date: <u>June 5, 2006</u> P.O. Box 1404 Alexandria, VA 22313-1404 703.836.6620		By: Scott W. Cummings Registration No. 41,567					